

CC
19-1
AG

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	Bt	297	01-11-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final Original	5 4 10 4 7 8
1	26 6 20 2 24 3
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Claim	Date
Final Original	5 4 10 4 7 8
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Claim	Date
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DES AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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